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| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|---|-------------|----------------------|---------------------|------------------|
| 09/919,275 | 07/31/2001 | Arthur Papier | AP-1 | 4087 |
| 37211 | 7590 | 05/31/2005 | EXAMINER | |
| BASCH & NICKERSON LLP 1777 PENFIELD ROAD PENFIELD, NY 14526 | | | HAYES, JOHN W | |
| | | | ART UNIT | PAPER NUMBER |
| | | | 3621 | |

DATE MAILED: 05/31/2005

Please find below and/or attached an Office communication concerning this application or proceeding.

Office Action Summary**Application No.**

09/919,275

Applicant(s)

PAPIER ET AL.

Examiner

John W Hayes

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-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --
Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If the period for reply specified above is less than thirty (30) days, a reply within the statutory minimum of thirty (30) days will be considered timely.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) ☒ Responsive to communication(s) filed on 28 March 2005.
 2a) ☒ This action is **FINAL**. 2b) ☐ This action is non-final.
 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) ☒ Claim(s) 1-24 and 28 is/are pending in the application.
 4a) Of the above claim(s) _____ is/are withdrawn from consideration.
 5) ☐ Claim(s) _____ is/are allowed.
 6) ☒ Claim(s) 1-24 and 28 is/are rejected.
 7) ☐ Claim(s) _____ is/are objected to.
 8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) ☐ The specification is objected to by the Examiner.
 10) ☒ The drawing(s) filed on 13 July 2001 is/are: a) ☒ accepted or b) ☐ objected to by the Examiner.
 Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
 Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
 a) ☐ All b) ☐ Some * c) ☐ None of:
 1. ☐ Certified copies of the priority documents have been received.
 2. ☐ Certified copies of the priority documents have been received in Application No. _____.
 3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

- 1) ☒ Notice of References Cited (PTO-892)
 2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)
 3) ☐ Information Disclosure Statement(s) (PTO-1449 or PTO/SB/08)
 Paper No(s)/Mail Date _____.
 4) ☐ Interview Summary (PTO-413)
 Paper No(s)/Mail Date. _____.
 5) ☐ Notice of Informal Patent Application (PTO-152)
 6) ☐ Other: _____.

DETAILED ACTION

Status of Claims

1. Applicant has amended claims 1-3, 5, 24 in the response filed on 28 March 2005. Thus, claims 1-24 and 28 remain pending and are presented for examination.

Response to Arguments

2. Applicant's arguments filed 11 March 2005 have been fully considered but they are not persuasive.

3. Applicant argues that Wilk's automated diagnostic system teaches away from the visual aid intended by the present invention. Examiner submits, however, that the language of claim 1 includes a diagnostic engine that automatically identifies a subset of diagnoses that are consistent with the characteristics.

Examiner submits that Wilk, along with Bodick, disclose this and that it would have been obvious that a medical professional would have used the systems of Wilk and Bodick as an aid rather than a substitute for a diagnosis. Wilk states that "even if the patient eventually sees a physician for confirming the diagnosis, the computer input will facilitate the physician's evaluation of the patient's condition and reduce the amount of time necessary for the physician to examine the patient" (Col. 3, lines 64-68), thus supporting the idea that the invention may be used as an aid rather than a final diagnosis.

4. Applicant further argues that Wilk does not disclose the storage of images in an image database, separate from a knowledgebase. Examiner respectfully disagrees and submits that Wilk discloses a memory that stores entire images related to different diseases (Col. 2, lines 46-56; Col. 7, lines 19-24) stored at a dermatological diagnosis and treatment facility and this is being interpreted by the examiner as an image database. Wilk also discloses a computer that compares the image of a patient with the previously stored images and overlaying the sections with sections of the stored images (Col. 2, lines 50-56); and to derive a diagnosis as to the patient's condition (Col. 4 line 65-Col. 5 line 3). This seems to suggest that the computer processing or knowledgebase is separate from the stored images.

Furthermore, Bodick et al disclose a knowledgebase that includes both textual and pictorial information

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(Col. 2, lines 30-61; Col. 3, lines 20-34 and 44-48; Col. 6, lines 15-22; Col. 12 line 50-Col. 13 line 11; Col. 15 line 62-Col. 16 line 3).

5. Applicant further argues that Wilk fails to disclose a user interface to solicit a plurality of descriptive characteristics. Examiner respectfully disagrees and submits that Wilk discloses the use of a keyboard for entry of information such as known medical history and conditions which is also used in diagnosing the patient (Col. 7, lines 3-8).

6. Applicant further argues that Bodick fails to disclose automatically identifying, from a plurality of possible diagnoses, a subset including a plurality of diagnoses that are consistent with the characteristics. Examiner respectfully disagrees and submits that Bodick et al disclose that information on specific diseases may be requested, such as a request for retrieval of all cases having specified features or a request for all cases in which a particular disease was diagnosed and Side by side presentation of pictorial images and display of text information relating to different diseases or features would assist evaluation and diagnosis (Col. 5, lines 40-50). This passage seems to suggest that a concurrent display of a plurality of images.

7. Applicant further argues that there is no motivation to suggest the references of Wilk and Bodick et al. In response to applicant's argument that there is no suggestion to combine the references, the examiner recognizes that obviousness can only be established by combining or modifying the teachings of the prior art to produce the claimed invention where there is some teaching, suggestion, or motivation to do so found either in the references themselves or in the knowledge generally available to one of ordinary skill in the art. See *In re Fine*, 837 F.2d 1071, 5 USPQ2d 1596 (Fed. Cir. 1988) and *In re Jones*, 958 F.2d 347, 21 USPQ2d 1941 (Fed. Cir. 1992). In this case, Wilk discloses the use of a computerized system to aid in the diagnosis of a patient condition and Wilk discloses that the system may be used by a physician as input that will facilitate the physician's evaluation of the patient's condition and reduce the amount of time necessary for the physician to examine the patient (Col. 3, lines 64-68). Bodick et al also disclose a system used as an aid to a medical professional for diagnosing patient conditions and suggest that such a system would benefit a physician since specialists often need assistance in diagnosing a medical condition or disease based upon his clinical observations of a patient (Col. 2, lines 3-7). Examiner

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submits that, based on these teachings among others, one having ordinary skill in the art would have been motivated to combine the teachings of the references to Wilk and Bodick et al.

8. As per Claims 6-11, applicant argues that Bodick et al fail to disclose a diagnostic image stack.

Examiner respectfully disagrees and submits that Bodick et al disclose a diagnostic image stack (Figure 26) comprising a subset of a plurality of images, each image being associated with a common diagnosis and an index into the subset of images wherein the index is independent of the common diagnosis including a display of associated characteristics of diagnoses when a user selects a portion of an image (Figure 26; Col. 2, lines 30-45; Col. 5, lines 40-48; Col. 6, lines 34-46; Col. 20, lines 15-39). More specifically, Bodick et al disclose the display of images associated with various diseases in an image stack or side by side presentation (Col. 2, lines 30-45; Col. 5, lines 40-48; Col. 6, lines 34-46).

9. As per claim 12, applicant argues that Wilk cannot teach what has been alleged since it would require a user interface and characteristics that are not taught by Wilk. Examiner respectfully disagrees and notes that Wilk does disclose a user interface as discussed above.

10. With regard to claims 16-18 and 20-21, examiner has cited an additional reference to support the previous Official Notice statement. Examiner also submits that the citation of the reference in the rejection below has been added as evidence to substantiate the prior Official Notice statement, does not result in a new issue, and therefore this action will be made Final.

11. With respect to claims 19, 22-23 and 28, Bodick et al disclose that it will be apparent that the presentation of pictorial images in conjunction with textual data which relate to those images and assist in the evaluation of them is valuable in any area where the appearance of an object under study/examination is of critical importance (Col. 9, lines 42-56). Thus, examiner submits that it would have been obvious to one having ordinary skill in the art at the time of applicant's invention to modify the system of Wilk and utilize the invention for any purpose as suggested by Bodick et al for the cognitive process of diagnosis. Examiner also notes that

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Claim Rejections - 35 USC § 103

12. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

13. Claims 1-15, 19, 22-24 and 28 are rejected under 35 U.S.C. 103(a) as being unpatentable over Wilk, U.S. Patent No. 5,437,278 in view of Bodick et al, U.S. Patent No. 4,945,476.

As per **Claim 1**, Wilk discloses a system to aid in a visual diagnostic process, comprising:

- an image database (Col. 1, lines 55-62; Col. 2, lines 46-56; Col. 6, lines 15-26);
- a knowledge database, cross-referenced to said image database, for the purpose of assisting in the diagnostic process (Col. 1, lines 55-58; Col. 2, lines 25-32; Col. 4, lines 55-60);
- a user-interface to solicit, from a user, a plurality of descriptive characteristics of a sample requiring diagnoses (Col. 4, lines 48-54; Col. 7, lines 3-8);
- a diagnostic engine, responsive to said characteristics, wherein said characteristics of the sample are employed by said engine to automatically identify, from a plurality of possible diagnoses, a diagnosis that is consistent with the characteristics (Col. 1, lines 59-62; Col. 2, lines 27-33; Col. 4 line 65-Col. 5 line 3); and

Wilk, however, fails to disclose identifying a subset of diagnoses and using the subset of diagnoses to reorganize an information space of said image database for concurrent presentation of a plurality of images for user review via the user-Interface. Bodick et al disclose a computerized aid to the process of medical diagnosis and teach a diagnostic engine that returns a subset including a plurality of diagnoses responsive to characteristics entered by a user (Col. 2, lines 30-61; Col. 3, lines 25-30; Col. 5, lines 40-57; Col. 12 line 64-Col. 13 line 11; Col. 20, lines 15-38; Col. 24, lines 28-48). Bodick et al further disclose automatically reorganizing an information space for concurrent presentation of a plurality of images or user review (Col. 2, lines 30-61; Col. 3, lines 25-30; Col. 5, lines 40-48; Col. 6, lines 15-22; Col.

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20, lines 15-38). Thus, it would have been obvious to one of ordinary skill in the art at the time of applicant's invention to modify the system of Wilk and incorporate the ability to identify a subset of possible diagnoses based on a sample of characteristics and further to display the images or other data related to the subset of diagnoses as taught by Bodick et al. Bodick et al provides motivation by indicating that these features would benefit doctors or physicians by assisting them in searching information that would help them in diagnosing a medical condition (Col. 1, lines 10-16; Col. 2, lines 1-8).

As per **Claim 2**, Wilk fails to disclose a dynamic diagnostic engine to reorganize the information space upon modification of one of a plurality of descriptive characteristics. Bodick et al disclose a dynamic diagnostic engine to reorganize the information space upon modification of a descriptive characteristics by the user (Col. 2, lines 50-62; Col. 5, lines 50-57; Col. 20, lines 15-39). It would have been obvious to one of ordinary skill in the art at the time of applicant's invention to modify the system of Wilk and include a dynamic diagnostic engine such as that described by Bodick et al in order to assist the doctor in diagnosing a particular medical condition and allow the doctor to dynamically modify a characteristic in an effort to view all proposed diagnoses that may be related.

As per **Claim 3**, Wilk discloses a method for aiding a visual diagnostic process, including the steps of

- creating an image database from a collection of images pertaining to a particular subject matter (Col. 1, lines 55-62; Col. 2, lines 46-56; Col. 6, lines 15-26);
- creating a knowledge database with other data related to the particular subject matter, wherein said knowledge database is cross-referenced to said image database, for the purpose of assisting in the diagnostic process (Col. 1, lines 55-58; Col. 2, lines 25-32; Col. 4, lines 55-60);
- collecting from a user, through a user-interface adapted to the particular subject matter, a plurality of descriptive characteristics of a sample requiring diagnoses (Col. 4, lines 48-54; Col. 7, lines 3-8);

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- in response to said descriptive characteristics, automatically identifying, from a plurality of possible diagnoses included within the knowledge database, a diagnosis consistent with the descriptive characteristics collected from the user (Col. 1, lines 59-62; Col. 2, lines 27-33; Col. 4 line 65-Col. 5 line 3).

Wilk, however, fails to disclose identifying a subset of diagnoses and using the subset of diagnoses to reorganize an information space of said image database for concurrent presentation of a plurality of images for user review via the user-Interface. Bodick et al disclose a computerized aid to the process of medical diagnosis and teach a diagnostic engine that returns a subset including a plurality of diagnoses responsive to characteristics entered by a user (Col. 2, lines 30-61; Col. 3, lines 25-30; Col. 5, lines 40-57; Col. 12 line 64-Col. 13 line 11; Col. 20, lines 15-38; Col. 24, lines 28-48). Bodick et al further disclose reorganizing an information space for concurrent presentation of a plurality of images or user review (Col. 2, lines 30-61; Col. 3, lines 25-30; Col. 5, lines 40-48; Col. 6, lines 15-22; Col. 20, lines 15-38). Thus, it would have been obvious to one of ordinary skill in the art at the time of applicant's invention to modify the system of Wilk and incorporate the ability to identify a subset of possible diagnoses based on a sample of characteristics and further to display the images or other data related to the subset of diagnoses as taught by Bodick et al. Bodick et al provides motivation by indicating that these features would benefit doctors or physicians by assisting them in searching information that would help them in diagnosing a medical condition (Col. 1, lines 10-16; Col. 2, lines 1-8).

As per **Claim 4**, Wilk fails to disclose a dynamic diagnostic engine to reorganize the information space upon modification of one of a plurality of descriptive characteristics. Bodick et al disclose a dynamic diagnostic engine to reorganize the information space upon modification of a descriptive characteristic (Col. 2, lines 50-62; Col. 5, lines 50-57; Col. 20, lines 15-39). It would have been obvious to one of ordinary skill in the art at the time of applicant's invention to modify the system of Wilk and include a dynamic diagnostic engine such as that described by Bodick et al in order to assist the doctor in diagnosing a particular medical condition and allow the doctor to dynamically modify a characteristic in an effort to view all proposed diagnoses that may be related.

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As per **Claims 5 and 24**, Wilk discloses a system for reducing diagnostic uncertainty using cross-referenced knowledge and image databases, comprising:

- a user-interface to solicit a plurality of characteristics of diagnoses from a user (Col. 4, lines 48-54; Col. 7, lines 3-8);

- a diagnostic engine, wherein said characteristics of diagnoses are employed to automatically identify, from a plurality of possible diagnoses for which data is stored in the knowledgebase, a diagnosis from the knowledgebase that is consistent with the characteristics (Col. 1, lines 59-62; Col. 2, lines 27-33; Col. 4 line 65-Col. 5 line 3).

Wilk, however, fails to disclose identifying a subset of diagnoses and using the subset of diagnoses to reorganize an information space of said image database for concurrent presentation of a plurality of images for user review via the user-Interface. Bodick et al disclose a computerized aid to the process of medical diagnosis and teach a diagnostic engine that returns a subset including a plurality of diagnoses responsive to characteristics entered by a user (Col. 2, lines 30-61; Col. 3, lines 25-30; Col. 5, lines 40-57; Col. 12 line 64-Col. 13 line 11; Col. 20, lines 15-38; Col. 24, lines 28-48). Bodick et al further disclose automatically reorganizing an information space for concurrent presentation of a plurality of images or user review (Col. 2, lines 30-61; Col. 3, lines 25-30; Col. 5, lines 40-48; Col. 6, lines 15-22; Col. 20, lines 15-38). Bodick et al further disclose wherein the plurality of characteristics of diagnosis include exposure to certain materials and morphology (Col. 26 line 30-Col. 35 line 30). Thus, it would have been obvious to one of ordinary skill in the art at the time of applicant's invention to modify the system of Wilk and incorporate the ability to identify a subset of possible diagnoses based on a sample of characteristics and further to display the images or other data related to the subset of diagnoses as taught by Bodick et al. Bodick et al provides motivation by indicating that these features would benefit doctors or physicians by assisting them in searching information that would help them in diagnosing a medical condition (Col. 1, lines 10-16; Col. 2, lines 1-8).

As per **Claims 6-11**, Wilt fails to disclose a diagnostic image stack comprising a subset of a plurality of images, each image being associated with a common diagnosis, wherein each image is

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displayed to depict stages of a disease progression or a plurality of images associated with a particular diagnosis or wherein an image presented to the user includes a display of associated characteristics of diagnoses when a user selects a portion of an image being displayed. Bodick et al disclose a diagnostic image stack (Figure 26) comprising a subset of a plurality of images, each image being associated with a common diagnosis and an index into the subset of images wherein the index is independent of the common diagnosis including a display of associated characteristics of diagnoses when a user selects a portion of an image (Figure 26; Col. 2, lines 30-45; Col. 5, lines 40-48; Col. 6, lines 34-46; Col. 20, lines 15-39). It would have been obvious to one of ordinary skill in the art at the time of applicant's invention to modify the system of Wilk and include the above features as taught by Bodick et al in an effort to facilitate the physicians diagnosis of a medical condition by presenting an easily understandable means for enabling the physician to browse different images associated with a particular diagnosis. Bodick et al further discloses a plurality of images associated with a particular diagnosis, however, fail to further disclose images depicting disease progression. Examiner submits, however, that this would have been obvious in view of the teachings of Bodick et al in an effort to offer a plurality of images to the physician in order to determine the nature of the particular disease associated with the current patient.

As per **Claim 12**, Wilk further discloses wherein the diagnostic engine uses the characteristics of diagnoses to perform a pattern recognition operation on the knowledge database and to identify diagnoses with matching characteristics (Col. 1, lines 59-62; Col. 2, lines 27-33; Col. 4 line 65-Col. 5 line 3).

As per **Claims 13-14**, Wilk further discloses wherein the system is applicable to and includes characteristics of diseases that have a dermatological manifestation or visible to the unaided human eye (Col. 2, lines 35-45).

As per **Claim 15**, Wilk further disclose wherein the system for reducing diagnostic uncertainty is applicable to and includes characteristics of diseases that are determined based upon a finding determined by mechanical examination means (Figure 1; Col. 2, lines 10-16).

As per Claims 19 and 22-23, Wilk and Bodick et al fail to specifically disclose wherein the system for reducing diagnostic uncertainty is applicable to and includes characteristics of oral medications. Bodick et al, however, disclose that it will be apparent that the presentation of pictorial images in conjunction with textual data which relate to those images and assist in the evaluation of them is valuable in any area where the appearance of an object under study/examination is of critical importance. Thus, it would have been obvious to one having ordinary skill in the art at the time of applicant's invention to modify the system of Wilk and utilize the invention for any purpose as suggested by Bodick et al for the cognitive process of diagnosis.

As per Claim 28, Wilk discloses a system to aid in a visual diagnostic process, comprising:

- a user-interface to solicit a plurality of descriptive characteristics of a sample requiring diagnoses such as modality (Col. 4, lines 48-54; Col. 7, lines 3-8);
- a diagnostic engine, wherein said characteristics of the sample are employed by said engine to identify, from a plurality of possible diagnoses for which data is stored in a knowledgebase, a diagnosis that is consistent with the characteristics (Col. 1, lines 59-62; Col. 2, lines 27-33; Col. 4 line 65-Col. 5 line 3); and

Wilk, however, fails to disclose identifying a subset of diagnoses and using the subset of diagnoses to reorganize an information space of said image database for concurrent presentation of a plurality of images for user review via the user-Interface. Bodick et al disclose a computerized aid to the process of medical diagnosis and teach a diagnostic engine that returns a subset of diagnoses responsive to characteristics entered by a user (Col. 2, lines 30-61; Col. 3, lines 25-30; Col. 5, lines 40-57; Col. 12 line 64-Col. 13 line 11; Col. 20, lines 15-38; Col. 24, lines 28-48). Bodick et al further disclose reorganizing an information space for concurrent presentation of a plurality of images or user review (Col. 2, lines 30-61; Col. 3, lines 25-30; Col. 5, lines 40-48; Col. 6, lines 15-22; Col. 20, lines 15-38). Thus, it would have been obvious to one of ordinary skill in the art at the time of applicant's invention to modify the system of Wilk and incorporate the ability to identify a subset of possible diagnoses based on a sample of

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characteristics and further to display the images or other data related to the subset of diagnoses as taught by Bodick et al. Bodick et al provides motivation by indicating that these features would benefit doctors or physicians by assisting them in searching information that would help them in diagnosing a medical condition (Col. 1, lines 10-16; Col. 2, lines 1-8).

Wilk further fails to specifically disclose that the system is used for the investigation of a death. Bodick et al, however, disclose that it will be apparent that the presentation of pictorial images in conjunction with textual data which relate to those images and assist in the evaluation of them is valuable in any area where the appearance of an object under study/examination is of critical importance. Thus, it would have been obvious to one having ordinary skill in the art at the time of applicant's invention to modify the system of Wilk and utilize the invention for any purpose including investigating a cause of death as suggested by Bodick et al for the cognitive process of diagnosis.

14. Claims 16-18 and 20-21 are rejected under 35 U.S.C. 103(a) as being unpatentable over Wilk, U.S. Patent No. 5,437,278 in view of Bodick et al, U.S. Patent No. 4,945,476 and Kehr et al, U.S. Patent Application Publication No. US 2003/0036683 A1.

As per **Claims 16-18 and 20-21**, Wilk and Bodick et al fail to disclose wherein the user interface to solicit a plurality of characteristics includes at least one symptom represented as an icon. Examiner takes Official Notice, however, that representing items with an icon in a user interface is well known in the art and it would have been obvious to one having ordinary skill in the art at the time of applicant's invention to use icons as a matter of convenience for the user. In support of this Official Notice statement, examiner refers to the teachings of Kehr et al, wherein Kehr et al disclose the use of icons to symbolize various medical information and characteristics associated with a patient (paragraph 362). Accordingly, examiner submits that it would have been obvious to one of ordinary skill in the art at the time of applicant's invention to modify the systems of Wilk and Bodick et al and include the use of icons to represent to symbolize various characteristics or symptoms related to the health of the patient as taught by Kehr et al.

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As stated previously, one would have been motivated to use icons since they were well known in the art at the time of applicant's invention as a means to conveniently represent information in a user interface.

Conclusion

15. **THIS ACTION IS MADE FINAL.** Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).

A shortened statutory period for reply to this final action is set to expire THREE MONTHS from the mailing date of this action. In the event a first reply is filed within TWO MONTHS of the mailing date of this final action and the advisory action is not mailed until after the end of the THREE-MONTH shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later than SIX MONTHS from the mailing date of this final action.

16. **Examiner's Note:** Examiner has cited particular columns and line numbers in the references as applied to the claims below for the convenience of the applicant. Although the specified citations are representative of the teachings in the art and are applied to the specific limitations within the individual claim, other passages and figures may apply as well. It is respectfully requested that the applicant, in preparing the responses, fully consider the references in entirety as potentially teaching all or part of the claimed invention, as well as the context of the passage as taught by the prior art or disclosed by the examiner.

17. The prior art previously made of record and not relied upon is considered pertinent to applicant's disclosure.

- Lemelson et al disclose a computerized medical diagnostic system wherein clinical data is analyzed according to criteria contained in a knowledgebase in order to make a diagnosis
- Herren et al disclose an integrated disease information system

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- Jacobs et al disclose a system for creating and maintaining a medical decision making knowledgebase
- Yamada et al disclose a computer-aided diagnosis system for medical use.

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18. Any inquiry concerning this communication or earlier communications from the examiner should be directed to John Hayes whose telephone number is (571)272-6708. The examiner can normally be reached Monday through Friday from 5:30 to 3:00.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Jim Trammell, can be reached on (571)272-6712.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://portal.uspto.gov/external/portal/pair>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free).

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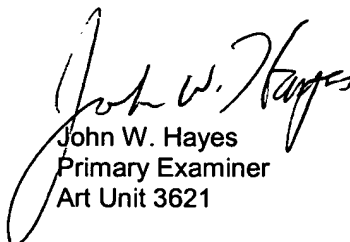
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Hand delivered responses should be brought to the Customer Service Window, Randolph Building, 401 Dulany Street, Alexandria, VA 22314.


John W. Hayes
Primary Examiner
Art Unit 3621

May 24, 2005